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Vol. I FEBRUARY-MARCH 1962 Nos. 5 & 6

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# Journal of the Chemists and Druggists' Association

MADRAS-3

OFFICIAL ORGAN OF THE ASSOCIATION

Editor

SHRI R. GANESAN

**Vol. I** **FEBRUARY-MARCH 1962** **Nos. 5 & 6**

## Industry and Trade—Retailers

In the two previous issues, we dwelt at length about the problems facing the Manufacturers, Wholesalers and Importers. The other and the largest section in the Drugs Trade, *viz.*, Retailers—in spite of the difference in the volume of trade, knowledge etc.—plays the most important role in catering to the needs of customers and the Medical Profession as well, in regard to their requirements in medicines. In view of the peculiar and complicated nature of their problems, a detailed analysis re: their handicaps and difficulties, is necessary to understand the nature of the problems and to find out proper solutions.

It is gratifying that the Federation of All India Chemists and Druggists, All India Retail Chemists Association and State Chemists and Druggists Associations, like Madras, Bombay, Calcutta and Delhi etc., mainly espouse the cause of the Retailers and endeavour to remove their disabilities. Whereas the State Associations mentioned above represent also Wholesalers and Importers and a few Manufacturers, the All India Retail Chemists Association fights only for the cause of the Retailers. Their efforts coupled with the efforts of the other Associations have achieved good results in the matter of some of the problems facing the Retailers today. But one thing can be said without any fear of contradiction, *i.e.*, the Retailers' problems have been presented to the Government—Central and State—and the public in a thorough manner and if these Associations with the co-operation of the Retailers continue these efforts, there is no doubt it will be possible to achieve remarkable results in a few years.

Having mentioned in a general way, it is but proper that the present situation re: the Retailers and their problems are dealt with in detail.

The retail trade is carried on in big Cities like Bombay, Calcutta and Madras are also in big Villages and Towns with a population of about 5000 and more. The turnove

**Views expressed in the Journal are not necessarily the views of the Association.**

—**EDITOR.**

however ranges from Rs. 5000/- to Rs. 50/- per day; the capital invested from Rs. 5 lakhs to Rs. 5000/- the number of employees from 50 to 1 and the working hours from 24 to 8 a day.

There are a few Retailers whose knowledge compares very favourably with the highly qualified Chemists in the Manufacturing Section; but a few know only to effect sales of the medicines on prescriptions. A large number in the rural areas know only the regional language and their knowledge of English is limited to reading the names of the Medicines and dispensing them.

The Retailer has got direct contact with the consumers and the Medical profession and it is absolutely necessary for him to observe the following principles strictly:

(1) To keep the shop tidy and clean always keeping the medicines properly arranged.

(2) Sufficient care should be taken to see that the approach is also clean and presentable so as to impress the customers.

(3) Courteous treatment, prompt attention and supplying the requirements of the customers correctly.

(4) To adopt a uniform price and not to take advantage of scarcity of any of the essential Drugs.

(5) Not to undersell at any time.

(6) To have a thorough knowledge of all the medicines available in his shop and to cater same according to prescriptions of the doctors and not to substitute any item in the prescription

(7) To be conversant with all Acts and Rules that concern the Drug Trade and comply with the requirements of such Acts and Rules.

(8) To be a member of any recognised Association representing the Trade,—District, State or All India—and voice forth the grievances through such Associations.

If the above points are borne in mind and the retailers act accordingly it will become easy for the Associations to redress their grievances and make the retail trade quite respectable yielding adequate returns.

As regards the problems facing the Retailer, the first and foremost is the strict compliance with the provisions of the Drugs Act and Rules which are being amended too often and made more and more complicated and cumbersome day by day. Besides the Drugs Act and Rules, there are several Acts as the Dangerous Drugs Act, Poisons Act, Prohibition Act etc. the provisions of which and the notifications issued under these Acts from time to time are too numerous and difficult to comprehend. It is here the Association can help the retailers to have up-to-date information.

The difficulties encountered by the retailers are being regularly reprensented by Associations in detail to the State and Central Governments through special deputations and representations from time to time besides elaborate discussions in all Drugs Conferences. (There have been so far seven Drugs Conferences and the Seventh Conference was held in Bombay on 20th January, 1962).

It is however painful to observe that the time taken by the Central Government in the matter of giving relief even in minor matters is inordinately long making the retailers and the Associations impatient and pessimistic. The assurance of the Chairman at the last (Seventh) Drugs Conference held at Bombay on 20th January 1962 gives a little encouragement and it can be hoped that some tangible results will follow soon, at any rate before the 8th Drugs Conference in the matter of— (a) Warranty, (b) Liberalisation in the interpretation of 'Qualified persons' under Rule 65 (15) (C) of the Drugs Rules, (c) Issue of proper cash bills instead of maintenance of Registers under rule 65 of the Drugs Rules and (d) Issue of Drugs licences for a period of two calendar or financial years.

In this connection, it has to be urged that necessary amendments to the Drugs Rules and the Pharmacy Act be brought in soon, for the speedy implementation of the above recommendations. It is equally necessary that Acts and Rules are drafted in simple and clear language to be understood by the business community without putting the trade, to go either to the concerned Officers or to an Advocate for interpretation of most of the Sections. Acts and Rules intended for Trade and Industry have to be so drafted as is easily understandable by all sectors.

There is another serious problem facing the Retailers. In some places more particularly in Madras some of the Wholesalers are having Retail business also. There are instances where the wholesalers are also distributors to a number of manufacturing firms and they run regular retail shops also.

The Pharmaceutical Enquiry Committee Report specifically lays down that the wholesalers should not interest themselves in retail trade. The Report also recommends the fixation of profit margin allowable to each section *viz*. wholesalers and retailers as is followed in United Kingdom. Some of the wholesalers taking advantage of their distributorship do have a retail shop and sell at a low price to consumers so that it becomes exceedingly difficult for the poor Retailers to compete with them It is true that in most of the places all over India, some of the fast selling items like penicillin, streptomycin etc. are sold by the retailers on a margin of 6¼ percent with or without sales tax

It is high time the Manufacturers, Distributors, Wholesalers and Retailers meet at a common table and discuss their problems without any mental reservation and arrive at healthy and practicable solutions to the satisfaction of all concerned. Unless this is done and that too early we are afraid the future of the Retailers cannot be rosy.

Then, there is the other problem of the Members of the Medical profession having dispensaries of their own and dispensing mixtures, powders and tablets. Some of them, it is stated, stock specialities also. According to the Drugs Act, they need not have a 'qualified person' as a Compounder since the responsibility is taken by the doctor himself They need not register themselves for Sales Tax. Including the cost of medicines and specialities they take a consolidated amount as fees. Such practice gives them a decided advantage over the retailer whose main purpose is to compound mixtures and powders and sell medicines. It is known to all in the trade that there is more margin in mixtures and powders than is the sale of medicinal products The therapy has so changed now that tablets in many cases can be prescribed in the place of mixtures and powders. The result is that the Retailer gets a much lower revenue from these items. Hence, would it be too much for us to request the Government and the Medical profession as well to see that members of the Medical profession follow the procedure adopted by their colleagues in United Kingdom and other advanced countries and examine patients, issue prescriptions and charge only consulting fees, leaving the retailer to dispense their prescriptions? If it is not possible for any reason whatever, the Medical Practitioner should also be asked to run dispensaries on the same lines and conditions governing the retailer.

If the Medical profession effects sales of products they should be asked to take out licences as per Drugs Act and Rules. It is time the retailers consider deeply over the problems that are confronting them today and if they do not act in an organised way through their respective Associations, we are afraid they are sure to miss the bus. It is highly desirable that a meeting of the representatives of the Medical Associations, Manufacturers, Wholesalers and Retailers should be arranged to solve this problem. It is necessary before calling a meeting that the items for discussion are well thought over, made out properly and circulated to all the Trade and Medical Associations to enable the Representatives of the Associations to come fully prepared and equipped for the discussion. If done in this way, it is possible to arrive at solutions for many of the problems. Decisions could be taken on the spot on noncontroversial matters.

The Federation of All India Chemists and Druggists is the most fitted and competent organisation to take up the initiative in this matter. All the State Chemists and Druggists Associations are its members. The Federation should first take up the matter with the Indian Medical Association and fix up the meeting.

It is gratifying that Shri N. J. Bole, the Hon. Secretary of the Federation has taken the initiative already and is making arrangements to have a conference at an early date. It is equally heartening that Shri N. R. Sharma, the former President and the present Treasurer of the All India Retail Chemists Association, Bombay, an indomitable and fearless worker for the cause of the Retailers has sent two circulars to the manufacturers pointing out to them the ways by which a happy relationship could be established between the Manufacturers and the Retailers. The response is also understood to be good.

The Retailer is the live-wire of the trade and he has to naturally shoulder the heavy responsibility of conducting the business in an ethical and proper manner, of course having an eye on adequate returns.

Let us hope that the united efforts and co-ordinated action of all Associations and the Federation will bear fruit soon and the retailers in India will be able in the near future to come up to the standards of their counterparts in U. K. and other advanced countries of the world.

## QUESTIONS AND ANSWERS

**Q.** 1. Are Sulpha Drugs Poisonous than Potassium Cyanide?

**A.** It depends on the composition and quantity of the 'Sulpha Drugs'.

**Q.** 2. If by mistake or oversight sulpha drugs are consumed what is the result on the human life? and, if Potassium Cyanide is consumed what is the reaction and fate?

**A.** This also depends on the potency and quantity of the Sulpha Drugs Consumed.
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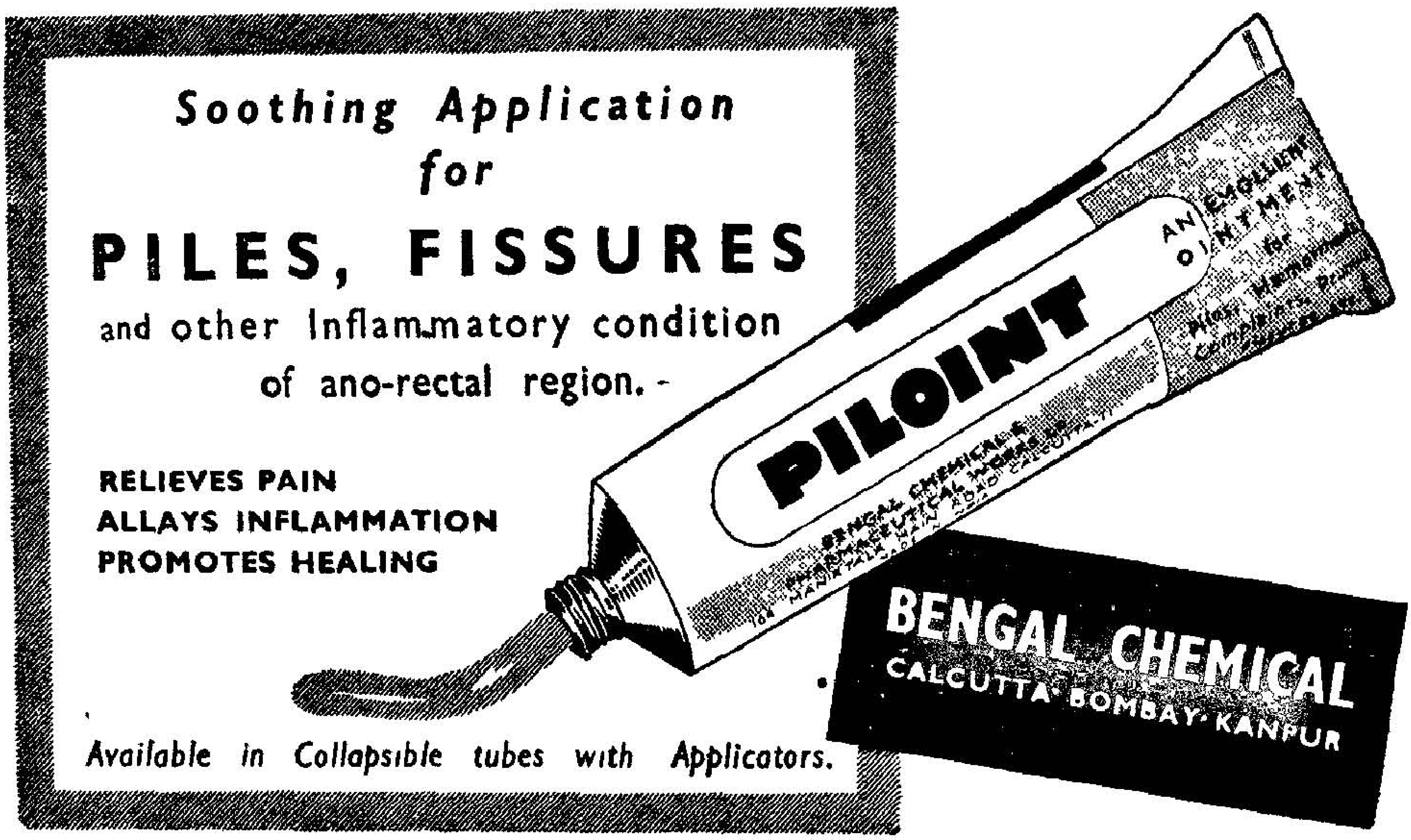


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# Doctors, Druggists and Turmoil

BY

Dr. JACK R. KARL

[In advanced countries like U. S and U. K. the relationship among manufacturers, distributors, wholesalers and retailers is clearly defined, and one sector understands the other quite well. It is unfortunate that in our country no such principles are followed, with the result that the retailer is put to great difficulties. This reproduced article written by a famous doctor of New Jersey (U S.) is a timely and opportune reminder to the Medical Profession re. their relationship with the retailer. When such difficulties are felt by advanced countries, it is needless to point out the enormity of the problem in our country It is time that the Associations of Medical Practitioners, Manufacturers, Wholesalers and Retailers exercise their minds to solve the problem in a detached and objective manner "—**Ed.**]

Turmoil in the 'pharmaceutical industry' has reached a point where we, physicians must take a forceful stand and come to the assistance of the neighbourhood pharmacist. If conditions continue as they are in the research, manufacture and distribution of drugs the physician will suffer the eventual consequences. Patients complain about the high cost of medicines. Pharmacists are getting gray hair watching the accumulation of boxes, bottles, tablets and capsules on the shelves in their stores. Frankly, how many of us, as doctors, take the trouble to inspect the area where pharmacists compound their prescriptions for their patients? Such inspection might shock us. It is time we doctors began to assist the pharmacists. By helping them, we will be helping ourselves. Pharmacists are in a turmoil as to what to do with the shelves loaded with obsolete and unsalable drug products dispensed by prescription only—with many more coming. The cost of all this is enormous and must be borne by the pharmacist at a great loss, or passed on to John Q. Public.

Many pharmaceutical companies make similar drugs, for example, the antibiotic tetracycline. After a time the chlorine was removed and two other preparations appeared. One contained citric acid and the other did not. Each was marketed under a different 'trade name'. The citric acid was supposed to increase the absorption of the antibiotic. After another brief lapse of time, another change is made. This is called demethychlor tetracycline. It is about three times more potent than tetracycline against susceptible organism, has greater stability in body fluids, a low order of toxicity and a lower rate of renal clearance. It is supposed to supply continuously high antibacterial effectiveness for at least one full day after dosage has been discontinued. With such a wonderful description one would imagine that the early forms of tetracyclines would be withdrawn; but that does not happen.

Another company started out with oxytetracycline and later also introduced tetracycline. After a time, along comes an improvement: the addition of glucosamine. It is asserted that this addition potentiates the tetracycline for higher oral-dosage blood levels. Again the trade name changes.

If these chemical changes were such major improvements, why were the older versions not withdrawn and the doctors notified accordingly? This seldom occurs. You need only to open the 1961 Physicians' Desk Reference to find that the older products are still being described. The argument is that many doctors write prescriptions for the older preparations. Thus, the pharmacist must carry a stock of every type and colour But why should that obsolete product with lesser activity continue to be marketed and detailed to the physician?

Another problem is produced by "cross licensing". This means that a company other than the originator may manufacture and market the same product under another trade name. Let me cite one instance: the

antibiotic potassium phenethicillin. It originated in England. Six pharmaceutical companies in the United States were licensed to manufacture it, each under a different trade name. Furthermore, it is prepared as a tablet, for oral solution and as a pediatric drop. A drug store must carry 18 different packages of potassium phenethicillin. Our country encourages free enterprise and competition which I heartily favour; but not to the point where the general public must bear the burden of unnecessary increased cost of medicines or where the pharmacist assumes unnecessary losses. In my opinion, *the government should not permit different trade names for the same drug.*

A certain chemical was developed which reduces blood pressure and increases renal flow. The preparation is distributed in tablet form in six strengths and I shall call it by the letter A. Another preparation, B, is introduced and said to be an improved version of a known diuretic. The two are now combined to produce a third compound, C, an improvement over A and B. In the meanwhile, another antihypertensive, D, appears with the added features of a calming agent. But the older vrrsions still lie on drugstore shelves. A is combined with D to produce E - having a more marked effect. D is then combined with B to produce F - which combines in one tablet the antihypertensive heart-slowing and calming effects of D with the diuretic and antihypertensive potentiating effects of B. Now comes G - a mild stimulant and anti-depressant that is combined with D to produce an emotional stabilizer. If that is not enough, the final is H - a combination of G and B All these preparations are in tablet form, in various strengths and from one company. If this is confusing to the reader, how do you think the pharmacist must feel, carrying such a financial burden? How gullible does he think the medical profession is? These flagrant examples probably can be multiplied a hundred-fold.

What then is the solution to this serious problem? Shall we wash our hands of the mess and say it is not ours to correct and write for every product manufactured regardless of how it affects the pharmacists? Shall we leave it for someone 'higher up' to solve? *No, it is our problem and medical societies and individual doctors can correct this situation.*

First, ethical, reputable, pharmaceutical companies should be put on notice that promiscuous elaboration and distribution of drugs be discontinued.

Second, if a company releases without doubt and with adequate clinical trial an improvement over a previous drug marketed by them, then the latter should be swiftly withdrawn from the market. The company should not wait until demand for it produces little return

Third, we doctors should refrain from prescribing drugs that have been produced and packaged under a private name which are copies of those developed by known ethical, reputable pharmaceutical companies. This is a serious heart-ache to the ethical pharmacist.

Fourth, where several pharmaceutical companies have marketed the same product under a different trade name, the doctor should not specify a specific brand, but use the accepted letters A—R—B, meaning "*any reliable brand*".

(*By courtesy of The Eastern Pharmacist —February, 1962*).

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# Seventh Drugs Conference, Bombay

## Some of the points relating to Manufacture of Pharmaceutical preparations and Allied Matters discussed at the Conference

*(Sponsored by the Indian Chemical Manufacturers' Association)*

**(1) Arrangements for testing samples and avoidance of delays in tests :**

It was stated by the Chairman that arrangements are being made to establish Analytical Laboratories in each State. It is hoped that by the beginning of 1963, most of these labs would be working. There will be no room for misapprehensions afterwards.

**(2) Issue of notices by Drugs Authorities for trifling matters :**

It was stated that instructions have been issued to see that no harassment is done.

---

*(Sponsored by the Pharmaceutical Society of India)*

**(1) Separate Manufacturing Licences - for change of premises and also even for change of sections of manufacture :**

It was contended by Sri Borkar :—

(*a*) that manufacturing concerns should not mind the small expenses of taking fresh licences. It was contended by the Associations that it is fair that a refund is granted for the unexpired period.

(*b*) The Chairman assured that he will rectify these as he felt that the stand was fair. Sri Ganesan informed the House that in making endorsements for Preparations, a separate endorsement and fees, are insisted for each preparation of the same medicine in different strengths. (This was, however, denied by Sri. Narasimhan, Drugs Inspector, Madras State)

**(2) Dates of Manufacture and Expiry :**

It was contended by the Manufacturers that it is sufficient if the expiry date is mentioned and not the date of manufacture. But they also explained that many items have to be replaced when nearing the expiry date. The Retailers contended that there should not be any mention of the date of manufacture but there can be the date of expiry. If the date of manufacture is printed, the Customers choose only the fresh ones making the older items unsaleable. The Manufacturers refuse to take them back.

Shri Ganesan mentioned that it is necessary that both the dates of manufacture and expiry should be printed.

---

*(Sponsored by the Indian Pharmaceutical Manufacturers Association)*

**(1) Recognition of the following as prescribed Pharmacopoeias :**

1. National Formulary of India.
2. Indian Pharmaceutical Codex.
3. Dental Formulary of U.S.A.
4. British Veterinary Codex.
5. British National Formulary.

Assurance was given that the needful would be done.

**(2) Permitting Manufacture of additional preparations immediately on receipt of application and fees without any delay.**

Agreed. Sri Ganesan requested the Secretary to see that the Drugs Controller of India sends instructions to the Drug Controllers of the States regarding interpretation of controversial sections etc , so that there will be a uniform interpretation in all the States. The individual discretion given to the State Drugs Controllers and the Drugs Inspectors of the States gives opportunities to some of them to interpret the sections in an unhelpful way for the Industry and Trade, thereby causing delay and harassment.

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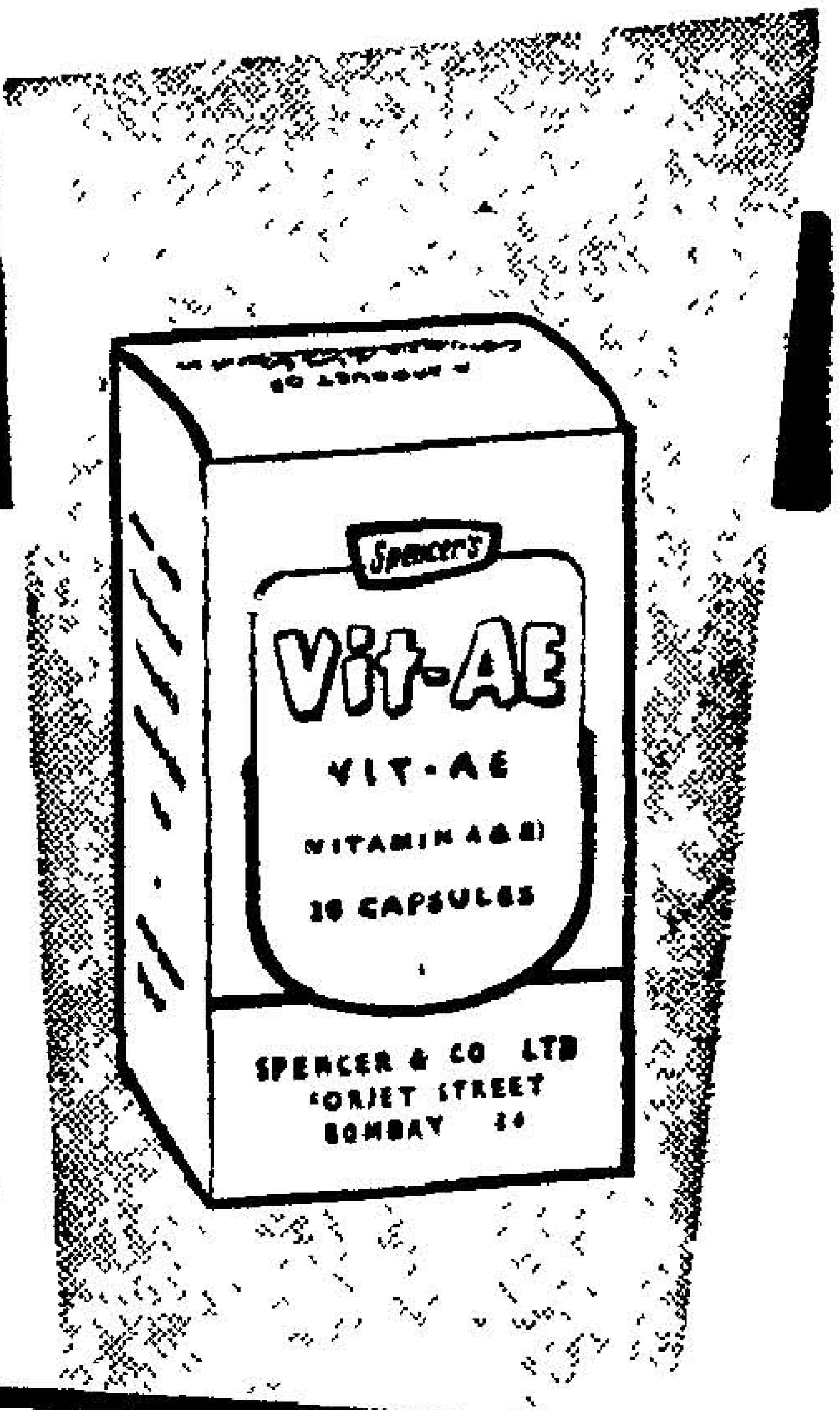


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# Modern Trends in Pharmaceutical Science

BY

Professor K. S. SRINIVASA VARADAN, M.A., M.SC., A.R.I.C.

*(President of the Madras Branch of the Indian Pharmaceutical Association)*

It is true that the art of pharmacy is gradually growing less and less in importance while the science of pharmacy is expanding at a considerable rate. With the taking up of extemporaneous compounding by the modern pharmaceutical firms and the consequent disappearance of dispensing of emulsions, pills, suppositories etc., the profession of pharmacy is shedding the art side. Though it is a loss on one side, it is a gain on the other side, for with this professional aspect being taken care of, by pharmaceutical manufacturers, opportunities have been thrown open to develop the scientific aspect. The pharmaceutical manufacturers with their huge resource of capital and with the team of employees in all fields of scientific activity, are able to undertake research on newer lines and arrive at results which go a long way to improve the products marketted and thus the pharmaceutical science is in a position to advance just as all other sciences do. Further, in addition to bestowing more and more attention on the synthesis of new products, they are also concentrating on the physicochemical aspects of the development of the finished product to suit the different types of medication and physical pharmacy is assuming a more and more important role.

First and foremost, the stability and the consequent potency of the drugs is being studied in various medications. The mechanism of the chemical decomposition of the drugs is being studied in great detail so that the life, or to be more mathematical, the half-life period of the drug may be calculated. All will be familiar with the half-life periods of radioactive chemicals. It represents the time taken for a radioactive chemical to lose half its original concentration by radiation. In a similar manner, the hours or days taken for a drug to become half its original concentration in different combination is calculated. This knowledge will enable one to predict the shelf-life of all drugs under prescribed conditions.

The stability of the vitamins in multivitamin preparations has been similarly assessed by measuring the half-life periods and it is possible to calculate the excess to be added to compensate for loss due to storage for specific periods. If the half-life period of vitamin C in a multivitamin preparation is 4·3 years, to maintain the labelled potency for a period of one year the initial concentration can be calculated to be 120% of the labelled concentration or in other words 20% excess must be added. The reaction of drugs in various systems is being studied in detail so as to throw more and more light on their stability under various conditions with a view to evolve the assessing of shelf-lives of drugs

Another direction in which this science is making considerable progress lies in the evolving of tablets of varying durations of activity. Tablets are now prepared so that with one and the same tablet, action can be

manifested partly immediately and the rest of the action may be manifested gradually for specific periods upto a day or the activity can repeat itself at stated periods, say every fourth hour for a period of 24 hours. This kind of tablets will avoid the necessity of taking tablets every fourth hour, to maintain a regular concentration of drugs in the system. They are known as sustained release tablets and repeat action tablets. Just as immediate and delayed activity is shown by a single injection of penicillin containing both crystalline sodium penicillin and procain penicillin and just as hypoglycemic effect is obtained immediately and for prolonged duration with the Insulin Zinc Suspension which contains a mixture of Insulin Zinc Suspension amorphous and crystalline, it is possible in the same tablet to get both immediate and prolonged action.

The development of the science of pharmacy is thus considerably helping not only to prepare newer, more effective and less toxic drugs but also to effectively administering the drugs and maintaining the potency of the drugs. And thus, side by side with the growth of modern scientific medicine, the science of pharmacy marches on so as to serve the suffering humanity in increasing measure.

(Condensed from the article published in the Souvenir of the Pharmacists' Association 1961—By kind permission of the author).

—★—

Two patients suffering from a disorder of the rhythm of the heart admitted to being peppermint addicts, a Welsh doctor said in the British Medical Journal. The first, said Dr. J. Gwyn Thomas of Denbigh, ate five packets of peppermints daily, and the other eight ounces (half a pound) of strong peppermints. "Only on stopping these gastric irritants was there any improvement in the heart rate and rhythm," Dr. Thomas said.

* * *

A depressed anxious-looking man met a cheerful friend.

"What's the matter with you?" asked the friend.

"My business is worrying me," was the reply.

"You're quite wrong," replied the cheerful one. "It is you that is worrying the business."

Cheerfulness and good humour will add a lot to the profits of any business.

* * *

**Chemist**:—"Yes, sir, this one bottle of lotion will cure your rheumatism."

**Customer**:—"You speak very definitely. How can you be sure?"

**Chemist**:—"Well, I've noticed that people who buy it never come back for a second bottle".

# Association News and Notes

**Drugs Act Not Administered as a Punitive Measure !**
**Instructions Issued to Officers to Educate the Trade First !!**
**Prosecutions under the Drugs Act Lowest in Madras State !!!**

*—Dr. K. P. Sarathy.*

A very pleasant "social get-together" function was arranged by the Association at the beautifully laid-out lawns of "Hotel Ashoka", Pantheon Road, Egmore, Madras at 6 p.m. on Saturday, the 10th March 1962. The Chief guest was Dr. (Miss) A. B. Marikar, M.D., D.G.O., Director of Medical Services, Madras State.

Dr. K. P. Sarathy, M.B.B.S., M.SC., Assistant State Drugs Controller, Messrs. C. V. Narasimhan, Ramamurthy, Ramachandran, Madhava Rao and other Drugs Inspectors in the city, Dr. Damodar Das and Dr. Pattabi, the Secretaries of the Indian Medical Association Madras City and State Branches respectively, Dr. Venkappa, a former President of the Indian Medical Association, Professor K. S. Srinivasa Varadan, Professor of Pharmaceutics, Madras Medical College and President of the Indian Pharmaceutical Association, Madras Branch were among the important guests present. A large number of city and mofussil members of the Association, Members of the Madras Pharmacy Council and others were also present.

On arrival Dr. Marikar was received by Mr. G. K. Sanker and Mr. G. Sriramulu the President and General Secretary of the Association and conducted to the lawns

Sri G. K. Sanker, President C. & D. Association Madras, welcoming Dr. A. B. Marikar, M.D., D.G.O., Director of Medical Services, Madras State.

Dr. K. P. Sarathy, M.SC., M.B.B.S., Assistant Director of Medical Services, addressing the gathering.

amidst the cheering ovation of the assemblage.

Welcoming the Chief Guest as the first lady to occupy the post of Director of Medical Services in the country Mr. G. K. Sanker, President of the Association, referred to her remarkable career of consistency and moderation and her unassuming and unpretentious qualities and expressed his great pleasure in welcoming her on behalf of the Association and "Drug Trade" in the State as a whole which the Association has been ably and meritoriously representing for over 3 decades and on his own behalf. He also assured the Director that the Association would play its part as the liaison between the Government and the Trade effectively and efficiently as heretofore and extend to Government its full co-operation in all matters calculated to promote the interests of the Drug Trade and the implementation of the various measures to the best advantage of all concerned. He also expressed his confidence that the Director would be pleased to avail of the services of the Association whenever needed in the common interests of all.

Extending a very cordial welcome to Dr. K. P. Sarathy, Assistant State Drugs Controller, Mr. Sanker expressed his grateful appreciation of the manner in which he (the former) had always been treating the problems of the trade with human approach and kindness and his sincere co-operation to the efforts of the Association in solving such problems.

Mr. Sanker also referred briefly to the steps taken by the Madras Pharmacy Council for registration of Pharmacists under the new provisions of Section 32(A) of the Pharmacy (Amendment) Act 1959 and pointed out that while Pharmacy Councils in other States were registering persons under these new provisions in thousands, the Madras Pharmacy Council was holding interviews and tests and only about a little

over 100 persons from among 400 to 500 applicants on the whole are understood to have been registered so far since August 1961, when the interviews first started. It would be desirable, Mr. Sanker added, if the Madras Pharmacy Council would also fall in line with the other State Councils and adopt a liberal attitude in the matter of registration and thus help to solve the problem facing a large number of persons engaged in the Chemists' trade for several years past and who have not been able to get themselves registered as Pharmacists till now for some reason or other.

Shri R. Ganesan, Editor of the Association Journal, who spoke next associated himself with the sentiments expressed by the President and said that all the members really felt very happy and proud for being given the opportunity to welcome the Director and have her as the chief guest for the evening function.

"The Madras Chemists and Druggists Association", Mr. Ganesan said, is one of the oldest and premier State Associations in India established as early as 1926, and having in its rolls as members Chemists and Druggists of not only the Madras State but also the neighbouring States of Andhra, Kerala and Mysore. The Association is housed in its own buildings. It celebrated its Silver Jubilee in 1951 and convened and conducted more than one Zonal Conference of Chemists and the All India Federation sessions in Madras under its auspices. It has a very brilliant record of service to the trade and the State.

Referring to the Association Journal, he said that because of the tremendous developments in medical science and therapy and the more or less fabulous increase in the number of modern drugs and medicines the responsibilities of the Chemist have grown a hundred fold and more nowadays. With a view therefore to educate him properly about the fast changing conditions in his profession and his growing responsibilities the Association, he said, considered it desirable to start a monthly Journal and from October 1961, the Association is publishing the Journal.

He offered his special thanks to Dr. Sarathy, who was kind enough to contribute a valuable article even for the first number of the Journal and expressed the hope that he would continue to give his valuable co-operation and assistance to the Journal. He also expressed the view that the Director of Medical Services and the Drugs Control Department should utilise the Association Journal as a media for conveying all important information, instructions, and guidance to the Drug Trade as such a course would facilitate quick and smooth implementation of the Drugs Act and Rules and allied measures that may be introduced from time to time for better administration of Drugs Control.

Dr. K. P. Sarathy, Assistant State Drugs Controller, then addressed the gathering. In the course of his address he made special mention about his first instructions to the inspecting staff immediately on his taking charge of the Drugs Control administration five years ago that the Drugs Act was not to be administered as a punitive measure and that the officers of the Drug Control department should first of all try to educate the trade about the various provisions of the Drug Control measures and give them proper guidance to proceed on right directions as the Act and Rules made thereunder were quite new. He also expressed his sincere appreciation of the co-operation of the Association in this direction which has all along been very helpful to the administration with the result that the number of prosecutions under the Drugs Act was the lowest in *Madras State*.

He also assured that he would always welcome the co-operation of the Association in educating the Chemist on the right lines. He was happy that the Association was

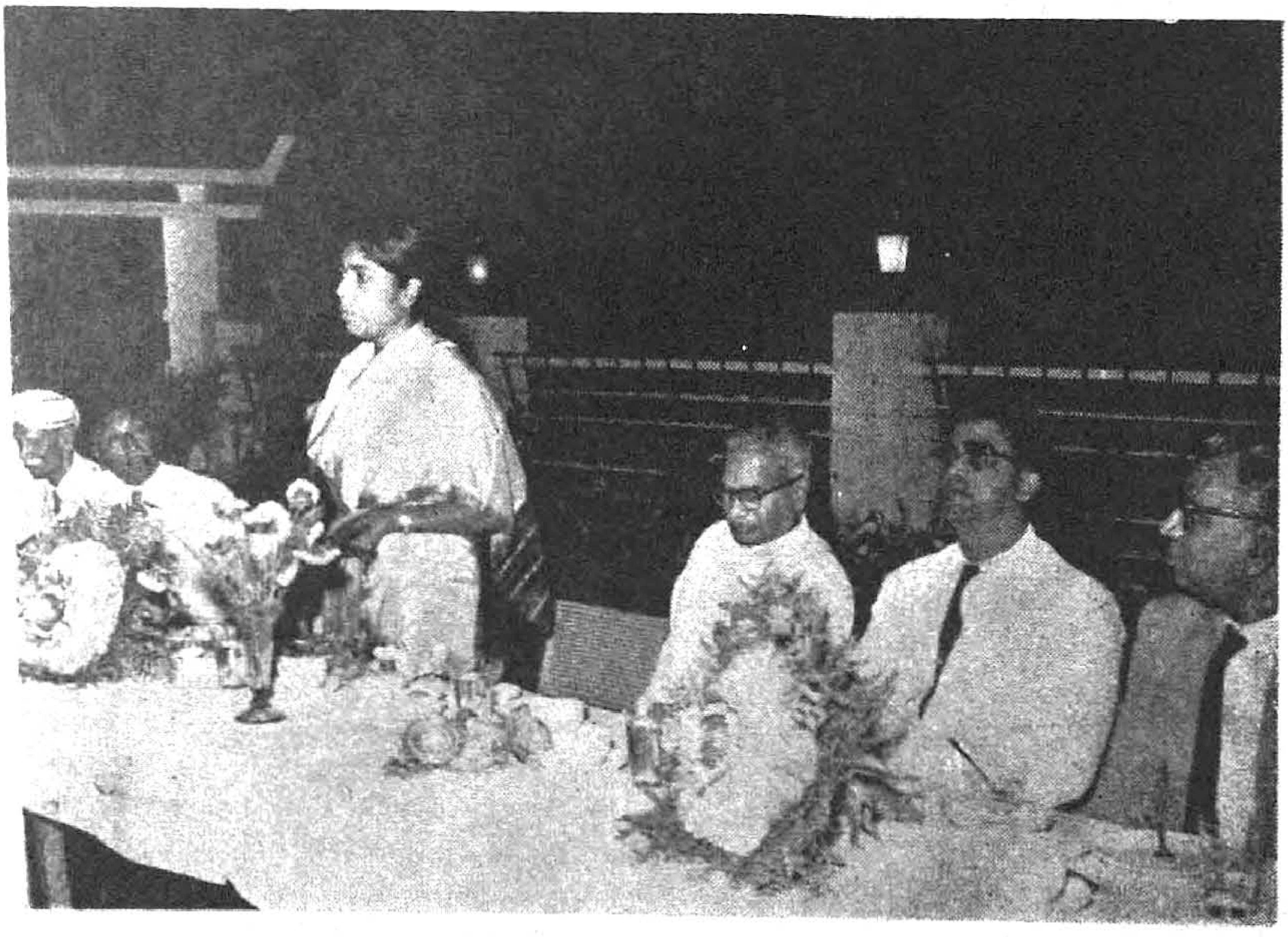
growing from strength to strength rendering very useful service to the Trade and the State as well by the publication of the Journal. He wished the Association and its members all progress and prosperity.

Regarding registration of Pharmacists Dr. Sarathy said that the profession of Pharmacy was a very responsible one as it has to deal with human lives. So, the Madras Pharmacy Council considered it advisable to interview and examine the candidates before they were registered as Pharmacists. Madras was the only State, he added, where the 'Diploma in Pharmacy' Course was conducted and about 250 persons would become diploma holders every year hereafter and in course of two or three years Madras would have sufficient number of fully qualified *Pharmacists* to meet the requirements of not only Government hospitals and dispensaries but also the requirements of private dispensaries and the trade as well.

Dr. Marikar thanked the President and members of the Association for giving her such a nice reception and for the kind words spoken about her. She had no idea that she would have to make a speech and she did not therefore come prepared for it. However, she added, Dr. Sarathy had in his speech explained the working of the Drug Control department, quite clearly and she entirely agreed with what he said. She would like to assure that she would always be prepared to do her mite to help the Association in solving the various problems facing the trade from time to time. The co-operation of the department, she assured, would always be available to the Association and it was for the Association to see that the Chemists deliver the goods correctly and earn the good will and confidence of the public.

After refreshments and tea there was an exhibition of some film shorts by the courtesy of the U. S. I. S. (Man learns to heal and Atoms for Medicine).

Mr. C. Sriramulu, M.A. the General Secretary of the Association proposed the vote of thanks.



Dr. A. B. Marikar, M.D., D.G.O., Director of Medical Services, replying.

**(The circular dated 3rd March 1962 sent to members (only important portions) is reproduced below for the benefit of our members and our readers).**

## Registration of Pharmacists—Pharmacy Act 1948 as Amended by the Pharmacy (Amendment) Act 1959.

The following notification issued by the Madras Pharmacy Council has been published in "Hindu" Madras—on 3rd March 1962 (Page 11)

### Madras Pharmacy Council

NOTIFICATION

It is hereby notified that provisions in Section 32-A of the Pharmacy Act 1948, (corrected upto 1-9-1961) will remain in operation only till 30-4-1962 (inclusive), subject to proviso under sub-rule (3) therein.

2. Holders of B.Sc. Degree in Pharmacy and Diplomas in Pharmacy (Old) obtained before 28-2-1951 are requested to apply for registration as Pharmacists before that date *i.e.* 30-4-1962.

3. Matriculate and non-matriculate compounders and Diplomaholders qualified between 28-2-1951 and 15-9-1957 can be registered under Section 31—Class D. before 30-4-1962 on production of a certificate of experience for five years prior to 28-2-1951.

4. All Registered Pharmacists are requested to renew their Certificates before 31-3-1962 for retention of their names in the Madras Pharmacy Register last issued.

**P. K. MATHURAMUTHU,**
*Registrar and Treasurer.*

Section 32 (A) (1) (d) of the Pharmacy (Amendment) Act 1959 (relating to persons carrying on business or profession of Pharmacy and those engaged in dispensing of Drugs) and Section 31 (d) referred to in the notification above are reproduced below for the information of members :

"32-A (1) (d) (i & ii) : 32-A. Special provisions for registration of certain persons —(1) Notwithstanding anything contained in section 32, a State Council may also permit to be entered on the register,

(d) the names of persons who carry on the business or profession of Pharmacy in the State, and

(i) would have satisfied the conditions for registration as set out in section 31, on the date appointed under sub-section (2) of section 30, had they applied for registration on or before that date ; or

(ii) have been engaged in the compounding of drugs in a hospital or dispensary or other place in which drugs are regularly dispensed on prescriptions of medical practitioners as defined in sub-clause (iii) of clause (f) of section 2 for a total period of not less than five years prior to the date appointed under sub-section (2) of section 30," (*i.e.* prior to 28-2-1951).

"31 (d). Any person who has been engaged in the compounding of drugs in a hospital or dispensary or other place in which drugs are regularly dispensed on prescriptions of medical practitioners for a total period of not less than five years prior to the date notified under sub-section (2) of section 30", *i.e* (28-2-1951).

Under the above notification those who obtained certificates from the State Drugs Controller as competent persons under rule 65 (15) (C) of the Drugs Rules 1945, between 28-2-1951 and 15-9-1957, and who for some reason or other have not yet been registered as Pharmacists, may apply now for registration under section 31 (d) by producing a certificate of experience for five years *prior to 28-2-1951.*

Those who failed to apply for registration in the First Register before 28-2-1951 and those who failed to apply for registration under the provisions of Section 32-A of the Pharmacy (Amendment) Act 1959 in pursuance of the previous notifications issued by the Pharmacy Council and published in the Hindu and Mail in November-December 1960 and May 1961, may also apply now for registration obtaining a certificate of experience for 5 years prior to 28-2-1951 as per the above notification *before 30-4-1962.*

Persons who have been engaged in the compounding of drugs in a place where dispensing is done for five years prior to 28-2-1951, and who can produce certificates to that effect as mentioned in section 31 (d) reproduced above will do well to avail of this last opportunity and apply for registration before 30-4-1962 as after that date the special provision (32-A (1) (d) (ii) will cease to be in force.

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Statement showing the ownership and other particulars about the "Journal of the Chemists and Druggists' Association, Madras," as required under the Registration of Newspapers (Central) Rules, 1956 (as amended).

| | | | |
|---|---|---|---|
| 1. | Place of Publicatlon | ... | Office of the Chemists and Druggists' Association, 1, Memorial Hall Street, Madras-3. |
| 2. | Periodicity of its Publication | ... | Monthly. |
| 3. | Printer's Name | ... | Ravai Manickam, |
| | Nationality | ... | Indian, |
| | Address | ... | Ravai & Sons (Printers), 148, Big Street, Triplicane, Madras-5. |
| 4. | Publisher's Name | ... | N. Aiyadurai Pillai, |
| | Nationality | ... | Indian, |
| | Address | ... | 6/7, Philips Street, Madras-1. |
| 5. | Editor's Name | ... | R. Ganesan, |
| | Nationality | ... | Indian, |
| | Address | ... | 18, Parthasarathy Swamy Street, Triplicane, Madras-5. |
| 6. | Owners of the Publication | ... | The Chemists and Druggists' Association, 1, Memorial Hall Street, Madras-3. |

I, N. Aiyadurai Pillai, hereby declare that the particulars given above are true to the best of my knowledge and belief.

*15th March 1962.*

**N. AIYADURAI PILLAI,**
*Publisher.*

**Rules under Madras Prohibition Act**

*(G.O. Ms. No. 393, Home, 25th Jan. 1962)*

S.R.O. No. A-152 of 1962.

In exercise of the powers conferred by sections 18, 21 and 54 of the Madras Prohibition Act, 1937 (Madras Act X of 1937), the Governor of Madras hereby makes the following rules :—

**Rules**

1. No person or institution shall use rectified spirit or absolute alcohol in the manufacture of medicinal and toilet preparations or release from a bonded warehouse medicinal and toilet preparations containing alcohol except under the appropriate licences in Form L. 1 or L 4 for a bonded manufactory and a bonded warehouse respectively, issued under the Medicinal and Toilet Preparations (Excise Duties) Rules, 1956.

2. The holder of every licence in the said Form L. 1 or L. 4 shall in every case where a whole-time officer-in-charge is appointed to supervise work, pay to the State Government in advance, the cost of supervisory establishment including pay, leave salary, provident fund and pensionary contributions at least one week before the month for which the cost of supervision is paid. In cases where the services of a part-time officer are utilized, the licensee shall pay the cost of supervision at such rate as may be prescribed by the State Government. Where the officer-in-charge or other staff on duty is retained for supervision for any time in excess of the normal prescribed working hours on any day, the licensee shall also pay to the State Government the overtime fees payable to the staff, at such rates as may be prescribed by the State Government within ten days following the month in which overtime was worked.

**P. T. SREEKUMARA PANIKKER,**
*Deputy Secretary to Government.*

*Fort St. George Gazette: Feb 21, 1962.*

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(Department of Revenue)

**Medicinal and Toilet Preparations**

*New Delhi, the 17th February, 1962.*

G. S. R. 202—In pursuance of sub-rule (3) of rule 60 of the Medicinal and Toilet Preparations (Excise Duties) Rules 1956, the Central Government hereby declares that the new medicinal preparations specified in the table below shall be included in the category of unrestricted preparations :—

**Table**

(Unrestricted Preparations)

**Medicinal Preparations**

| | |
|---|---|
| Betonin<br>Cobeton<br>Deltastab Nasal Spray<br>Vicks Formula 44 Cough Mixture | Manufactured by M/s. Boots Pure Drug Co. (India) Private Ltd., Bombay. |
| Vicarin ... | Manufactured by M/s. G. W. Carnrick Co. (Asia) Ltd., Bombay. |

(No. 3/F. No. 45/5(16)/61—Opium)

**L. M. KAUL,**
*Deputy Secretary*

*Gazette of India: Feb 17, 1962.*

## Amendments to Madras Manufactured Drugs Rules

*(G.O. Ms. No. 296, Home, 19th Jan. 1962)*

S.R.O. No. A-111 of 1962.

In exercise of the powers conferred by sub-section (2) of section 8 of the Dangerous Drugs Act, 1930 (Central Act II of 1930), the Governor of Madras hereby makes the following amendments to the Madras Manufactured Drugs Rules 1932, published with Revenue Department Notification No. 203, dated the 29th April 1932, at pages 798 to 806 of Part I of the Fort St. George Gazette dated the 3rd May 1932, as subsequently amended, the same having been previously published as required by sub-section (1) of section 36 of the said Act.

### Amendments

In the said rules—

(1) in rule 24, in condition I, for the last sentence, the following shall be substituted, namely :—

" If the drug prescribed be a coca derivative, the quantity of the coca derivative prescribed shall not contain more than 400 mgm. of cocaine in the aggregate. If the drug prescribed be Pethidine Hydrochloride in the form of injections, the quantity of Pethidine Hydrochloride in the form of injections prescribed for supply on a single prescription shall not exceed twelve ampoules of 55 mgm. each or six ampoules of 107·5 mgm. each. If the drug prescribed be Pethidine Hydrochloride in the form of tablets the quantity of Pethidine Hydrochloride in the form of tablets prescribed for supply on a single prescription shall not exceed twelve tablets of 50 mgm. each or twenty four tablets of 25 mgm. each.

(2) In Form M-2 in condition IX(1), for the last sentence, the following shall be substituted namely :—

" If the drug prescribed be a coca derivative, the quantity of the coca derivative prescribed shall not contain more than 400 mgm. of cocaine in the aggregate. If the drug prescribed be Pethidine Hydrochloride in the form of injections, the quantity of Pethidine Hydrochloride in the form of injections prescribed for supply on a single prescription shall not exceed twelve ampoules of 55 mgm. each or six ampoules of 107 5 mgm. each. If the drug prescribed be Pethidine Hydrochloride in the form of tablets, the quantity of Pethidine Hydrochloride in the form of tablets prescribed for supply on a single prescription shall not exceed twelve tablets of 50 mgm. each or twenty-four tablets of 25 mgm. each ".

**P. T. SREEKUMARA PANIKKER,**

*Deputy Secretary to Government.*

*Fort St. George Gazette · Feb. 14, 1962.*

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## Amendments to Madras Denatured Spirit, Methyl Alcohol and Varnish (French Polish) Rules

*(G.O. Ms. No. 185, Home, 11th Jan. 1962)*

S.R.O. No. A-109 of 1962.

In exercise of the powers conferred by section 54 of the Madras Prohibition Act, 1937 (Madras Act X of 1937), the Governor of Madras hereby makes the following amendments to the Madras Denatured Spirit, Methyl Alcohol and Varnish (French Polish) Rules, 1950, published with the Home Department Notification S. R. O. No. A-1580 of 1959, dated the 4th March 1959, at pages 116-161 of the Rules Supplement to Part I of the Fort St. George Gazette, dated the 18th March 1959, as subsequently amended.

**Amendments (Extracts)**

In the said rules—

2. for the rule 2, the following rule shall be substituted, namely :—

"2. Definitions—(1) In these rules, unless there is anything repugnant in the subject or context—

(*a*) "the Act" means the Madras Prohibition Act, 1937;

(*b*) "Commissioner" means the Commissioner of Excise and Commercial Taxes, Board of Revenue, Madras;

(*c*) "denatured spirit" means spirit subjected to anyone of the following processes for the purpose of rendering it unfit for human consumption, namely :—

(*i*) the admixture with spirit of at least 50 degrees over proof of light caoutchoucine and pyridine bases in the proportion of half a litre of light caoutchoucine and half a litre of pyridine bases to 99 litres of spirit;

(*ii*) the addition of 4 litres of formalin to 100 litres of 60 degrees over proof strength of rectified spirit;

(*iii*) the addition of liquid soap, *i.e.*, a preparation made by mixing together and heating three parts of castor oil and one part of caustic soda in the proportion of 1 litre of liquid soap to 99 litres of spirit of at least 50 degrees overproof;

(*iv*) the addition of castor oil and caustic soda as specified below :—

For 100 parts of spirit, use one part of castor oil and 0·4 part of caustic soda solution, all by volume. The caustic soda solution is to be prepared by dissolving one part of solid caustic soda in three parts of water. Take the castor oil, add to it one and a half times its volume of alcohol, stir, and finally, add the caustic soda solution. A clear solution will be obtained which is to be added to the bulk of the alcohol;

(*v*) the addition of ammonia in the proportion of 3 volumes of liquor ammonia containing 25 to 26 per cent by weight of ammonia gas to 97 volumes of ethyl alcohol;

(*vi*) the use of one litre of light caoutchoucine and half a litre of pyridine to 98½ litres of spirit with the addition of 0·156 gram of methyl violet;

Provided that the spirit denatured according to this formula shall not be consumed in this State; and

(*vii*) the addition of concentrated sulphuric acid in the proportion of one part of the acid to nineteen parts of spirit;

Explanation—The light caoutchoucine and the Pyridine bases must satisfy the laboratory tests described in Appendix I.

(*d*) 6. In rule 9, in sub-rule (iii), for the last sentence, the following shall be substituted, namely :—

"In the case of licences granted only for denatured spirit in the first instance methylated spirit or methyl alcohol shall not be included subsequently without the prior approval of the Board of Revenue (Commercial Taxes). Similarly, in the case of licences granted only for methylated spirit or methyl alcohol, denatured spirit shall not be included subsequently without the prior approval of the Board of Revenue (Commercial Taxes)".

(e) In sub-rule (v), after the first sentence, the following sentence shall be inserted, namely :

"Where an application for the renewal of the licence has not been made within a period of one month before its expiry as specified herein, the licensing authority may admit such applications provided there are good and sufficient reasons for the delay".

(f) For sub-rule (vi), the following shall be substituted, namely :

"(vi) Cancellation or suspension of licence :—The licensing authority may after giving the licensee an opportunity to show cause within a reasonable time, not ordinarily exceeding fourteen days against the order proposed to be made by an order in writing stating the reasons therefor, cancel a licence issued under these rules or suspend it for such period as he thinks fit, either wholly or in part, if subsequent to the grant of the licence it is brought to notice that the licensee is suffering from leprosy or any contagious disease, or if in the opinion of the licensing authority, the licensee has failed to comply with any of the conditions of the licence or any of the provisions of the Act or the rules framed thereunder. Where a licence is cancelled or suspended as aforesaid or is not renewed after its expiry or its renewal is refused, the licensee shall not sell, use or otherwise dispose of any of the stock held by him at the time of such cancellation, suspension, expiry or refusal and shall abide by the orders of the licensing authority regarding the disposal of such stock by sale in auction or otherwise among the licensees or by any other method so as to enable the licensee to get the price for such stock. If the stock is found to be unsaleable or is not likely to fetch a price, the stock may be destroyed after obtaining orders of the Board of Revenue (Commercial Taxes) to that effect. The licensee shall not be entitled to claim any compensation on account of such cancellation, suspension or refusal of the licence or destruction of stocks".

(g) in sub-rule (vii), for the second sentence, the following shall be substituted, namely:

"In case of non-observance of the terms of the licence, the security so deposited may be forfeited to Government and the licence cancelled, provided that no forfeiture of deposit shall be made, unless the licensee has had a reasonable opportunity of showing cause against such a forfeiture".

*Fort St. George Gazette. Feb 14, 1962.*

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**Central Excise Collectorate, Madras**
**Central Excises**

(*Madras, the 31st January 1962*)

S. O. 410.

In exercise of the powers conferred on me by Rule 233 of the Central Excise Rules, 1944, read with Rule 51 ibid, I hereby direct that all manufacturers (in the taxable as well as exempted sectors) of cosmetics and toilet preparations falling under item 14 (F) of the Central Excise Tariff shall affix on each of the packages containing cosmetics and toilet preparations produced in their respective factories, a label showing in clearly discernible characters the following particulars :—*viz.*

(*i*) The name of the manufacturer,

(*ii*) The number of the Central Excise License in Form L. 4;

(*iii*) The name of the product together with the corresponding name under the Central Excise Tariff; and

(*iv*) The net weight of the product.

Before these labels are brought into use for being affixed on the packages, a specimen of each of such labels should be lodged with the Superintendent of Central Excise concerned for his record.

2. I hereby further direct that the clearances of cosmetics and Toilet preparations from factories in the exempted sector, *i.e.*, those falling within the exemption limit laid down in the Government of India, Ministry of Finance (Department of Revenue) Notification No. 107/61-CE, dated 20th April, 1961, shall be made on the licencees' own gate passes and the word "*Exempted Sector*", shall be written on the right-hand corner of such gate passes.

[No. IV/16/13/62-CE (Pol)].

**D. R. KOHLI,**
*Collector.*

**Note.**—Similar notifications have been issued by the Central Excise, Cochin, Bangalore-Poona and Calcutta.

*The Gazette of India: February 10, 1962.*

## Inspectors appointed under Drugs Act

(*G. O. Ms. No. 381, Health, 12th February 1962*).

II-2 No. 80 of 1962.

In pursuance of section 21 of the Drugs Act, 1940 (Central Act XXIII of 1940), ........ the Governor of Madras hereby appoints the persons specified in column (1) of the schedule below to be Inspectors for the purposes of Chapter IV of the said Act, at the stations specified in the corresponding entries to column (2) thereof within the local limits specified in the corresponding entries in column (3) of the said schedule, and specifies the Drugs Controller, Madras, as the authority to whom the said Inspectors shall be officially subordinate.

### The Schedule

| Name (1) | Station (2) | Local Limits (3) |
|---|---|---|
| 1. Sri C. N. Ramachandran ... | Madras City ... | Madras City |
| 2. Sri P. Balasubramanian ... | Madras City ... | Madras City |
| 3. Sri C. V. Malligarjunamurthy ... | Chingleput .. | Chingleput District |
| 4. Sri S. Natanasabapathy ... | Thanjavur ... | Thanjavur District |

*Fort St. George Gazette: 28-2-1962.*

**Submission of Applications for Import Licences and Inclusion of Detachable Form of Acknowledgement Therein:**

The following Public Notice [No. 16 ITC (PN)/62, dated the 14th February 1962] has been issued by the Government of India in the Ministry of Commerce and Industry :

It has been decided that, hereafter, all applications for import licences should include a detachable form of acknowledgement to enable the licensing authorities to acknowledge the application on receipt. Action is being taken to amend the application forms accordingly from the next licensing period. The trade is, therefore, informed that in future while submitting applications for import licences, they should enclose with the application, a self addressed acknowledgement card, according to the proforma mentioned below to facilitate to the acknowledgement.

**ACKNOWLEDGEMENT**

**Office of the JT/Dy/Chief Controller of Imports and Exports, New Delhi/Bombay/Calcutta Madras/Ernakulam, Etc.**

Ref. No.................. Dated..............................

Receipt of application dated.................... from.............................. for the import of ................................................with Treasury Receipt No.......... for Rs. ........................and other enclosures (.......... sheets) is hereby acknowledged.

This has been diarised in this office Dy. No. ................ dated..................

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**Enrolment of Exporters-only Enrolled Exporters to Enjoy benefits of the Scheme after 31st March, 1962.**

Information has been received from the Directorate of Export Promotion, Ministry of Commerce and Industry, Government of India, New Delhi, that the exporters in India who do not get themselves enrolled under the scheme for Enrolment before the 31st March, 1962 will be debarred from the benefits of the Export Promotion Schemes. Consequently only enrolled exporters will be eligible for participating in Export Promotion Schemes after the above-mentioned date.

—*Extracts from Indian Trade Journal, 24 February, 1962.*

**NOTICE**

Due to unavoidable circumstances the February and March 1962 issues of the Journal have had to be combined and published as February-March 1962. The Advertisements will however be calculated only as single insertions.

*EDITOR.*